EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet

County(ies):	San Diego	Fiscal Year: 20		
Program Workplan #:	CY-5.1		Date: _	2/28/06
Program Workplan Name:	Medication Support for Wards and Dependents		Page:_	1 of 6
Type of Funding:	2. System Development		Months of Operation: _	12
	Proposed Total Client Capacity of Program/Service: _	116	New Program/Service or Expansion:	New
	Existing Client Capacity of Program/Service:	0	Prepared by: N	Michelle Peterson
Client Capacity of Program/Service Expanded through MHSA:		116	Telephone Number:	(619) 563-2715

Client Capacity of Program/Service Expanded through MHSA:	116		Telephone Number:	(619) 563-2715
	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
A. Expenditures				
Client, Family Member and Caregiver Support Expenditures				
a. Clothing, Food and Hygiene				\$0
b. Travel and Transportation				\$0
c. Housing				
i. Master Leases				\$0
ii. Subsidies				\$0
iii. Vouchers				\$0
iv. Other Housing				<u>\$0</u>
d. Employment and Education Supports				\$0
e. Other Support Expenditures (provide description in budget narrative)				<u>\$0</u>
f. Total Support Expenditures	\$0	\$0	\$0	\$0
2. Personnel Expenditures				
a. Current Existing Personnel Expenditures (from Staffing Detail)				\$0
b. New Additional Personnel Expenditures (from Staffing Detail)				\$0
c. Employee Benefits				<u>\$0</u>
d. Total Personnel Expenditures	\$0	\$0	\$0	\$0
3. Operating Expenditures				
a. Professional Services				\$0
b. Translation and Interpreter Services				\$0
c. Travel and Transportation				\$0
d. General Office Expenditures				\$0
e. Rent, Utilities and Equipment				
f. Medication and Medical Supports				\$0
g. Other Operating Expenses (provide description in budget narrative)				<u>\$0</u>
h. Total Operating Expenditures	\$0	\$0	\$0	\$0
4. Program Management				
a. Existing Program Management				\$0
b. New Program Management				<u>\$0</u>
c. Total Program Management		\$0	\$0	
5. Estimated Total Expenditures when service provider is not known	\$580,000			\$580,000
6. Total Proposed Program Budget	\$580,000	\$0	\$0	\$580,000
B. Revenues				
1. Existing Revenues				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds				\$0
f. Grants				
g. Other Revenue				<u>\$0</u>
h. Total Existing Revenues	\$0	\$0	\$0	\$0
2. New Revenues				
a. Medi-Cal (FFP only)	\$22,000			\$22,000
b. Medicare/Patient Fees/Patient Insurance				\$0
c. State General Funds	\$18,000			\$18,000
d. Other Revenue				<u>\$0</u>
e. Total New Revenue	\$40,000	\$0		
3. Total Revenues	\$40,000	\$0	\$0	\$40,000
C. One-Time CSS Funding Expenditures	\$62,308			\$62,30
D. Total Funding Requirements	\$602,308	\$0	\$0	\$602,30
E. Percent of Total Funding Requirements for Full Service Partnerships				0.0%

EXHIBIT 5b--Mental Health Services Act Community Services and Supports Staffing Detail Worksheet

FY 06-07	Fiscal Year:		San Diego	County(ies):_
2/28/06	Date:		CY-5.1	Program Workplan #: _
2 of 6	Page:	ents	Medication Support for Wards and Dependent	Program Workplan Name: N
12	Months of Operation:		2. System Development	Type of Funding: _
New	New Program/Service or Expansion:	116	Total Client Capacity of Program/Service:_	Proposed 1
Michelle Petersor	Prepared by:	0	isting Client Capacity of Program/Service:_	Exis
(619) 563-2715	Telephone Number:	116	ogram/Service Expanded through MHSA:_	Client Capacity of Pro

Classification	Function	Client, FM & CG FTEs ^{a/}	Total Number of FTEs	Salary, Wages and Overtime per FTE ^{b/}	Total Salaries. Wages and Overtime
A. Current Existing Positions					
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0 \$0
					\$0 \$0
					\$0 \$0
					\$0
					\$0
					\$0
					<u>\$0</u>
	Total Current Existing Positions	0.00	0.00		\$0
B. New Additional Positions					
Psychiatrist	Provides Medication Support		1.00		\$0
Psychiatric Nurse	Provides Medication Support and Monitoring		1.00		\$0
Licensed Clinical Social Worker	Provides Case Management Activities		3.00		\$0
Clerical & Other Support Staff	Provides Clerical Support		1.00		\$0
Eligibility Technician	Provides Medi-Cal Screening and Eligibility		1.00		\$0
These staff positions are a likely profile for th	is workplan. However, the contractor shall propose	the specific staffing t	for this program to bes	t meet the program goals.	
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					<u>\$0</u>
	Total New Additional Positions	0.00	7.00		\$0
C. Total Program Positions		0.00	7.00		\$0

a/ Enter the number of FTE positions that will be staffed with clients, family members or caregivers.b/ Include any bi-lingual pay supplements (if applicable). Round each amount to the nearest whole dollar.

Mental Health Services Act CSS Budget Narrative

County(ies): San Diego Fiscal Year: 2006-07 Page: 3 of 6
Program Workplan #: CY-5.1 Date: 02/28/06

Program Workplan Name: Medication Support for Wards and Dependents

Type of Funding: 2. System Development New Program/Service or Expansion: New

Line #	Amount	Intensive Case Management
A.5	\$580,000	
		Estimated Total Expenditures (when service provider is not known) were derived by calculating the average cost per client for similar services among existing providers from FY 2005-06 budgets times the number of clients expected to be served in the fiscal year. Staffing for this program is based upon optimum staff to client ratios with approximately 60-70% of the total costs allocated for staff salaries and benefits. This budget is for 12 months from July 1, 2006 - June 30, 2007.
B.2.a	\$22,000	If applicable, new revenues were estimated for EPSDT Medi-Cal (FFP only) given the estimated number of clients and services expected to be Medi-Cal eligible.
B.2.c	\$18,000	If applicable, new revenues were estimated for EPSDT Medi-Cal (State General Fund) given the estimated number of clients and services expected to be Medi-Cal eligible.
B.2.e	\$40,000	Total New Revenue is the total EPSDT Medi-Cal revenue including the FFP and State General Fund portion
B.3	\$40,000	Total Revenues is the sum of all new (B.2.e) and existing revenue (B.1.h
С	\$62,308	One-Time CSS Funding Expenditures are the sum of the following
	\$62,308	One-time CSS funding for start-up and implementation expenditures for this program are equivalent to 6 weeks of service operations. Our County has used this method before with new programs and based on our past experience the equivalent of 6 weeks of funding seems to be a sufficient amount for Contractors to purchase most of the equipment and supplies needed for a new program. The majority of start-up funds are budgeted to purchase equipment such as computer hardware, software, cell phones, copier, fax, furniture and other office equipment and transportation for clients (if needed). Additionally, these funds may be used to secure or expand office space. Implementation funds are also needed for program staff to recruit, hire, and train personnel and will be used to develop initial program outreach strategies to get this program up and running. These start-up costs will be expended in the first quarter of FY 06-07 between July 1, 2006 - September 30,2006.
D	\$602,308	Total Funding Requirements equals the total proposed program budget less total revenues plus one-time CSS funding expenditures

EXHIBIT 5a--Mental Health Services Act Community Services and Supports Budget Worksheet

County(ies):	San Diego		Fiscal Year:	2007-08
Program Workplan #:	CY-5.1		Date:	2/28/06
Program Workplan Name:	Medication Support for Wards and Dependents		Page:	4 of 6
Type of Funding:	2. System Development		Months of Operation:	12
	Proposed Total Client Capacity of Program/Service: _	116	New Program/Service or Expansion:	New
	Existing Client Capacity of Program/Service:	0	Prepared by:	Michelle Peterson
Client Capacity of Program/Service Expanded through MHSA:		116	Telephone Number:	(619) 563-2715

Client Capacity of Program/Service Expanded through MHSA:	116		Telephone Number:	(619) 563-2715
	County Mental Health Department	Other Governmental Agencies	Community Mental Health Contract Providers	Total
A. Expenditures				
Client, Family Member and Caregiver Support Expenditures				
a. Clothing, Food and Hygiene				\$0
b. Travel and Transportation				\$0
c. Housing				
i. Master Leases				\$0
ii. Subsidies				\$0
iii. Vouchers				\$0
iv. Other Housing				<u>\$0</u>
d. Employment and Education Supports				\$0
e. Other Support Expenditures (provide description in budget narrative)				<u>\$0</u>
f. Total Support Expenditures	\$0	\$0	\$0	\$0
2. Personnel Expenditures				
a. Current Existing Personnel Expenditures (from Staffing Detail)				\$0
b. New Additional Personnel Expenditures (from Staffing Detail)				\$0
c. Employee Benefits				<u>\$0</u>
d. Total Personnel Expenditures	\$0	\$0	\$0	\$0
3. Operating Expenditures				
a. Professional Services				\$0
b. Translation and Interpreter Services				\$0
c. Travel and Transportation				\$0
d. General Office Expenditures				\$0
e. Rent, Utilities and Equipment				
f. Medication and Medical Supports				\$0
g. Other Operating Expenses (provide description in budget narrative)				\$0
h. Total Operating Expenditures	\$0	\$0	\$0	
4. Program Management				
a. Existing Program Management				\$0
b. New Program Management				\$0
c. Total Program Management		\$0	\$0	
5. Estimated Total Expenditures when service provider is not known	\$580,000			\$580,000
6. Total Proposed Program Budget	\$580,000	\$0	\$0	\$580,000
B. Revenues				
1. Existing Revenues				
a. Medi-Cal (FFP only)				\$0
b. Medicare/Patient Fees/Patient Insurance				\$0
c. Realignment				\$0
d. State General Funds				\$0
e. County Funds				\$0
f. Grants				ΨΟ
g. Other Revenue				<u>\$0</u>
h. Total Existing Revenues	\$0	\$0	\$0	\$0
2. New Revenues	ΨΟ	ΨΟ	ΨΟ	ΨΟ
a. Medi-Cal (FFP only)	\$22,000			\$22,000
b. Medicare/Patient Fees/Patient Insurance	φ∠∠,000			\$22,000
c. State General Funds	\$18,000			\$18,000
d. Other Revenue	\$10,000			\$18,000
	\$40,000	r c	# 0	
e. Total New Revenue		\$0 \$0	\$0 \$0	· ·
3. Total Revenues	\$40,000	\$0	\$0	
C. One-Time CSS Funding Expenditures				\$0
D. Total Funding Requirements	\$540,000	\$0	\$0	\$540,000
E. Percent of Total Funding Requirements for Full Service Partnerships				0.0%

EXHIBIT 5b--Mental Health Services Act Community Services and Supports Staffing Detail Worksheet

	County(ies): _	San Diego		Fiscal Year: _	FY 07-08
	Program Workplan #: _	CY-5.1		Date:_	2/28/06
Pi	rogram Workplan Name: <u>N</u>	Medication Support for Wards and Deper	ndents	Page:_	5 of 6
	Type of Funding:	System Development		Months of Operation:	12
	Proposed To	tal Client Capacity of Program/Service:	116	New Program/Service or Expansion:	New
	Existi	ing Client Capacity of Program/Service:	0	Prepared by: 1	Michelle Peterson
	Client Capacity of Prog	gram/Service Expanded through MHSA:	116	Telephone Number:	(619) 563-2715

Classification	Function	Client, FM & CG FTEs ^{a/}	Total Number of FTEs	Salary, Wages and Overtime per FTE ^{b/}	Total Salaries. Wages and Overtime
A. Current Existing Positions					
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0 \$0
					\$0 \$0
					\$0
					\$0
					\$0
					\$0
					<u>\$0</u>
	Total Current Existing Positions	0.00	0.00		\$0
B. New Additional Positions					
Psychiatrist	Provides Medication Support		1.00		\$0
Psychiatric Nurse	Provides Medication Support and Monitoring		1.00		\$0
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Eligibility Technician	Provides Medi-Cal Screening and Eligibility		1.00		\$0
These staff positions are a likely profile for t	this workplan. However, the contractor shall prop	ose the specific staffin	g for this program to be	st meet the program o	poals.
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					<u>\$0</u>
	Total New Additional Positions	0.00	7.00		\$0
C. Total Program Positions		0.00	7.00		\$0

a/ Enter the number of FTE positions that will be staffed with clients, family members or caregivers.
b/ Include any bi-lingual pay supplements (if applicable). Round each amount to the nearest whole dollar.

Mental Health Services Act CSS Budget Narrative

County(ies): San Diego Fiscal Year: 2007-08 Page: 6 of 6
Program Workplan #: CY-5.1 Date: 02/28/06

Program Workplan Name: Medication Support for Wards and Dependents

Type of Funding: 2. System Development New Program/Service or Expansion: New

Line #	<u>Amount</u>	Intensive Case Management
A.5	\$580,000	Estimated Total Expenditures (when service provider is not known) were derived by calculating the average cost per client for similar services among existing providers from FY 2005-06 budgets times the number of clients expected to be served in the fiscal year. Staffing for this program is based upon optimum staff to client ratios with approximately 60-70% of the total costs allocated for staff salaries and benefits. This budget is for 12 months
B.2.a	\$22,000	from July 1, 2007 - June 30, 2008. If applicable, new revenues were estimated for EPSDT Medi-Cal (FFP only) given the estimated number of clients and services expected to be Medi-Cal eligible.
B.2.c	\$18,000	If applicable, new revenues were estimated for EPSDT Medi-Cal (State General Fund) given the estimated number of clients and services expected to be Medi-Cal eligible.
B.2.e	\$40,000	Total New Revenue is the total EPSDT Medi-Cal revenue including the FFP and State General Fund portion.
B.3	\$40,000	Total Revenues is the sum of all new (B.2.e) and existing revenue (B.1.h).
D	\$540,000	Total Funding Requirements equals the total proposed program budget less total revenues plus one-time CSS funding expenditures.